

<b>FORM B1</b> <b>United States Bankruptcy Court</b> <b>Northern District of Ohio</b>		<b>Voluntary Petition</b>																
Name of Debtor (if individual, enter Last, First, Middle): <b>Fell, Lawrence</b>		Name of Joint Debtor (Spouse) (Last, First, Middle): <b>Fell, Sharon</b>																
All Other Names used by the Debtor in the last 6 years (include married, maiden, and trade names):		All Other Names used by the Joint Debtor in the last 6 years (include married, maiden, and trade names):																
Last four digits of Soc. Sec. No. / Complete EIN or other Tax I.D. No. (if more than one, state all): <b>xxx-xx-5602</b>		Last four digits of Soc. Sec. No. / Complete EIN or other Tax I.D. No. (if more than one, state all): <b>xxx-xx-7501</b>																
Street Address of Debtor (No. & Street, City, State & Zip Code): <b>11780 Harbour Light</b> <b>North Royalton, OH 44133</b>		Street Address of Joint Debtor (No. & Street, City, State & Zip Code): <b>11780 Harbour Light</b> <b>North Royalton, OH 44133</b>																
County of Residence or of the Principal Place of Business: <b>Cuyahoga</b>		County of Residence or of the Principal Place of Business: <b>Cuyahoga</b>																
Mailing Address of Debtor (if different from street address):		Mailing Address of Joint Debtor (if different from street address):																
Location of Principal Assets of Business Debtor (if different from street address above):																		
<b>Information Regarding the Debtor (Check the Applicable Boxes)</b>																		
<b>Venue</b> (Check any applicable box) <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.																		
<b>Type of Debtor</b> (Check all boxes that apply) <input checked="" type="checkbox"/> Individual(s) <input type="checkbox"/> Railroad <input type="checkbox"/> Corporation <input type="checkbox"/> Stockbroker <input type="checkbox"/> Partnership <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Other _____ <input type="checkbox"/> Clearing Bank		<b>Chapter or Section of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Sec. 304 - Case ancillary to foreign proceeding																
<b>Nature of Debts</b> (Check one box) <input checked="" type="checkbox"/> Consumer/Non-Business <input type="checkbox"/> Business		<b>Filing Fee</b> (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only.) Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form No. 3.																
<b>Chapter 11 Small Business</b> (Check all boxes that apply) <input type="checkbox"/> Debtor is a small business as defined in 11 U.S.C. § 101 <input type="checkbox"/> Debtor is and elects to be considered a small business under 11 U.S.C. § 1121(e) (Optional)																		
<b>Statistical/Administrative Information</b> (Estimates only) <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.		THIS SPACE IS FOR COURT USE ONLY																
Estimated Number of Creditors      1-15      16-49      50-99      100-199      200-999      1000-over <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>																		
Estimated Assets <table style="width: 100%; text-align: center;"> <tr> <td>\$0 to \$50,000</td> <td>\$50,001 to \$100,000</td> <td>\$100,001 to \$500,000</td> <td>\$500,001 to \$1 million</td> <td>\$1,000,001 to \$10 million</td> <td>\$10,000,001 to \$50 million</td> <td>\$50,000,001 to \$100 million</td> <td>More than \$100 million</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>			\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	More than \$100 million	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
\$0 to \$50,000	\$50,001 to \$100,000		\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	More than \$100 million										
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\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	More than \$100 million											
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>											

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): <b>FORM B1, Page 2</b> <b>Fell, Lawrence</b> <b>Fell, Sharon</b>	
<b>Prior Bankruptcy Case Filed Within Last 6 Years</b> (If more than one, attach additional sheet)			
Location Where Filed: <b>Cleveland</b>		Case Number: <b>03-20622</b>	Date Filed: <b>8/11/03</b>
<b>Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor</b> (If more than one, attach additional sheet)			
Name of Debtor: <b>- None -</b>		Case Number:	Date Filed:
District:		Relationship:	Judge:

  

<b>Signatures</b>	
<p style="text-align: center;"><b>Signature(s) of Debtor(s) (Individual/Joint)</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct.          [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.          I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p><b>X</b> <u>/s/ Lawrence Fell</u>          Signature of Debtor <b>Lawrence Fell</b></p> <p><b>X</b> <u>/s/ Sharon Fell</u>          Signature of Joint Debtor <b>Sharon Fell</b></p> <p>_____          Telephone Number (If not represented by attorney)</p> <p><u><b>October 4, 2005</b></u>          Date</p>	<p style="text-align: center;"><b>Exhibit A</b></p> <p>(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11)</p> <p><input type="checkbox"/> Exhibit A is attached and made a part of this petition.</p> <hr/> <p style="text-align: center;"><b>Exhibit B</b></p> <p>(To be completed if debtor is an individual whose debts are primarily consumer debts)</p> <p>I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter.</p> <p><b>X</b> <u>/s/ Michael E. Reardon</u> <u><b>October 4, 2005</b></u>          Signature of Attorney for Debtor(s) Date  <b>Michael E. Reardon</b></p> <hr/> <p style="text-align: center;"><b>Exhibit C</b></p> <p>Does the debtor own or have possession of any property that poses a threat of imminent and identifiable harm to public health or safety?</p> <p><input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition.  <input checked="" type="checkbox"/> No</p>
<p style="text-align: center;"><b>Signature of Attorney</b></p> <p><b>X</b> <u>/s/ Michael E. Reardon</u>          Signature of Attorney for Debtor(s)  <b>Michael E. Reardon 0062389</b>          Printed Name of Attorney for Debtor(s)  <b>Michael E. Reardon Co., LPA</b>          Firm Name  <b>7050 Engle Road Suite 100</b>  <b>Middleburg Heights, OH 44130</b>          Address  <b>Email: MReardonecf@msn.com</b>  <b>440-239-1109 Fax: 440-239-1326</b>          Telephone Number  <b>October 4, 2005</b>          Date</p>	<p style="text-align: center;"><b>Signature of Non-Attorney Petition Preparer</b></p> <p>I certify that I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, that I prepared this document for compensation, and that I have provided the debtor with a copy of this document.</p> <p>_____          Printed Name of Bankruptcy Petition Preparer</p> <p>_____          Social Security Number (Required by 11 U.S.C. § 110(c).)</p> <p>_____          Address</p> <p>Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document:</p> <p>_____          If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.</p> <p><b>X</b> _____          Signature of Bankruptcy Petition Preparer</p> <p>_____          Date</p> <p>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.</p>
<p style="text-align: center;"><b>Signature of Debtor (Corporation/Partnership)</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.          The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p><b>X</b> _____          Signature of Authorized Individual</p> <p>_____          Printed Name of Authorized Individual</p> <p>_____          Title of Authorized Individual</p> <p>_____          Date</p>	

**United States Bankruptcy Court**  
**Northern District of Ohio**

In re **Lawrence Fell,  
Sharon Fell**

Debtors

Case No. \_\_\_\_\_

Chapter 7

**SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts from Schedules D, E, and F to determine the total amount of the debtor's liabilities.

			AMOUNTS SCHEDULED		
NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	95,000.00		
B - Personal Property	Yes	3	17,826.88		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	2		125,181.00	
E - Creditors Holding Unsecured Priority Claims	Yes	2		1,553.42	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	12		76,036.75	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			3,651.00
J - Current Expenditures of Individual Debtor(s)	Yes	1			3,662.00
Total Number of Sheets of ALL Schedules		25			
Total Assets			112,826.88		
Total Liabilities				202,771.17	

In re **Lawrence Fell,  
Sharon Fell**

Case No. \_\_\_\_\_

Debtors

## SCHEDULE A. REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. (See Schedule D.) If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Market Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
Location: 11780 Harbour Light, North Royalton OH; ppn 481-27-338; Situated in the City of North Royalton, County of Cuyahoga and State of Ohio, and known as being all of Unit # 1780 (together with an undivided interest in the common areas and facilities appertaining to said unit in harbour Light Condominium No. 1) as shown by the drawings recorded in Volume 20 of Condominium Maps, Pages 50 to 52, inclusive, and as further described in the declaration and by-laws of said condominiums recorded in Deed Volume 13397, Page 613 of Cuyahoga County Records, be the same, more or less, but subject to all legal highways.	Fee simple	J	95,000.00	112,550.00

Sub-Total > **95,000.00** (Total of this page)

Total > **95,000.00**

(Report also on Summary of Schedules)

0 continuation sheets attached to the Schedule of Real Property

In re **Lawrence Fell,  
Sharon Fell**

Case No. \_\_\_\_\_

Debtors

## SCHEDULE B. PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property."

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Market Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1. Cash on hand		<b>Cash on hand</b>	<b>J</b>	<b>50.00</b>
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		<b>US Bank - checking acct#130 101 613 656 overdrawn \$213.00 (IRS levy \$1337.32 9/30/05)</b>	<b>J</b>	<b>0.00</b>
3. Security deposits with public utilities, telephone companies, landlords, and others.	<b>X</b>			
4. Household goods and furnishings, including audio, video, and computer equipment.		<b>Household goods and furnishings</b>	<b>J</b>	<b>2,500.00</b>
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	<b>X</b>			
6. Wearing apparel.		<b>Clothing</b>	<b>J</b>	<b>100.00</b>
7. Furs and jewelry.		<b>Jewelry</b>	<b>J</b>	<b>50.00</b>
8. Firearms and sports, photographic, and other hobby equipment.	<b>X</b>			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	<b>X</b>			

Sub-Total > **2,700.00**  
(Total of this page)

2 continuation sheets attached to the Schedule of Personal Property

In re **Lawrence Fell,  
Sharon Fell**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE B. PERSONAL PROPERTY**  
(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Market Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
10. Annuities. Itemize and name each issuer.	<b>X</b>			
11. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Itemize.		<b>Mortgage Information Systems 401k - Principal Financial Group administrator</b>	<b>H</b>	<b>3,456.88</b>
12. Stock and interests in incorporated and unincorporated businesses. Itemize.	<b>X</b>			
13. Interests in partnerships or joint ventures. Itemize.	<b>X</b>			
14. Government and corporate bonds and other negotiable and nonnegotiable instruments.	<b>X</b>			
15. Accounts receivable.	<b>X</b>			
16. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	<b>X</b>			
17. Other liquidated debts owing debtor including tax refunds. Give particulars.	<b>X</b>			
18. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property.	<b>X</b>			
19. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	<b>X</b>			

Sub-Total > **3,456.88**  
(Total of this page)

Sheet 1 of 2 continuation sheets attached  
to the Schedule of Personal Property

In re **Lawrence Fell,  
Sharon Fell**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE B. PERSONAL PROPERTY**  
(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Market Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
20. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	<b>X</b>			
21. Patents, copyrights, and other intellectual property. Give particulars.	<b>X</b>			
22. Licenses, franchises, and other general intangibles. Give particulars.	<b>X</b>			
23. Automobiles, trucks, trailers, and other vehicles and accessories.		<b>1998 Dodge Caravan; VIN 2BFP25B8WR653991; 55000 miles</b>	<b>J</b>	<b>1,670.00</b>
		<b>2005 Ford Focus ZX4; VIN 1FAFP34N95W114487</b>	<b>J</b>	<b>10,000.00</b>
24. Boats, motors, and accessories.	<b>X</b>			
25. Aircraft and accessories.	<b>X</b>			
26. Office equipment, furnishings, and supplies.	<b>X</b>			
27. Machinery, fixtures, equipment, and supplies used in business.	<b>X</b>			
28. Inventory.	<b>X</b>			
29. Animals.	<b>X</b>			
30. Crops - growing or harvested. Give particulars.	<b>X</b>			
31. Farming equipment and implements.	<b>X</b>			
32. Farm supplies, chemicals, and feed.	<b>X</b>			
33. Other personal property of any kind not already listed.	<b>X</b>			

Sub-Total > **11,670.00**  
(Total of this page)  
Total > **17,826.88**

Sheet 2 of 2 continuation sheets attached  
to the Schedule of Personal Property

(Report also on Summary of Schedules)

In re **Lawrence Fell,  
Sharon Fell**

Case No. \_\_\_\_\_

Debtors

## **SCHEDULE C. PROPERTY CLAIMED AS EXEMPT**

Debtor elects the exemptions to which debtor is entitled under:

*[Check one box]*

- ☐ 11 U.S.C. §522(b)(1): Exemptions provided in 11 U.S.C. §522(d). Note: These exemptions are available only in certain states.
- ☒ 11 U.S.C. §522(b)(2): Exemptions available under applicable nonbankruptcy federal laws, state or local law where the debtor's domicile has been located for the 180 days immediately preceding the filing of the petition, or for a longer portion of the 180-day period than in any other place, and the debtor's interest as a tenant by the entirety or joint tenant to the extent the interest is exempt from process under applicable nonbankruptcy law.

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Market Value of Property Without Deducting Exemption
<b><u>Cash on Hand</u></b> Cash on hand	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	50.00	50.00
<b><u>Household Goods and Furnishings</u></b> Household goods and furnishings	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)	2,500.00	2,500.00
<b><u>Wearing Apparel</u></b> Clothing	Ohio Rev. Code Ann. § 2329.66(A)(3)	100.00	100.00
<b><u>Furs and Jewelry</u></b> Jewelry	Ohio Rev. Code Ann. § 2329.66(A)(4)(c)	50.00	50.00
<b><u>Interests in IRA, ERISA, Keogh, or Other Pension or Profit Sharing Plans</u></b> Mortgage Information Systems 401k - Principal Financial Group administrator	Ohio Rev. Code Ann. § 2329.66(A)(10)(b)	3,456.88	3,456.88
<b><u>Automobiles, Trucks, Trailers, and Other Vehicles</u></b> 1998 Dodge Caravan; VIN 2BFP25B8WR653991; 55000 miles	Ohio Rev. Code Ann. § 2329.66(A)(2)	1,670.00	1,670.00

In re **Lawrence Fell,  
Sharon Fell**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE D. CREDITORS HOLDING SECURED CLAIMS**

State the name, mailing address, including zip code and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests. List creditors in alphabetical order to the extent practicable. If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R  H W J C	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION IF ANY
		DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND MARKET VALUE OF PROPERTY SUBJECT TO LIEN						
Account No. <b>7471642</b>								
<b>Charter One Mortgage</b> <b>1215 Superior Avenue</b> <b>Cleveland, OH 44114</b>	<b>J</b>	<b>7/00</b> <b>First Mortgage</b> <b>Location: 11780 Harbour Light, North</b> <b>Royalton OH; ppn 481-27-338; Situated</b> <b>in the City of North Royalton, County of</b> <b>Cuyahoga and State of Ohio, and known</b> <b>as being all of Unit # 1780 (together with</b> <b>an undivided interest in the common</b>					<b>102,434.00</b>	<b>7,434.00</b>
		Value \$ <b>95,000.00</b>						
Account No. <b>30000125970291000</b>								
<b>Drive Financial Services</b> <b>PO Box 660633</b> <b>Dallas, TX 75266-0633</b>	<b>J</b>	<b>2005</b> <b>Certificate of Title</b> <b>2005 Ford Focus ZX4; VIN</b> <b>1FAFP34N95W114487</b>					<b>12,631.00</b>	<b>2,631.00</b>
		Value \$ <b>10,000.00</b>						
Account No.								
<b>Harbour Light Condominium Assoc.</b> <b>11860 Harbour Light Drive</b> <b>North Royalton, OH 44133</b>	<b>J</b>	<b>2003</b> <b>Statutory Lien</b> <b>Location: 11780 Harbour Light, North</b> <b>Royalton OH; ppn 481-27-338; Situated</b> <b>in the City of North Royalton, County of</b> <b>Cuyahoga and State of Ohio, and known</b> <b>as being all of Unit # 1780 (together with</b> <b>an undivided interest in the common</b>					<b>5,351.00</b>	<b>5,351.00</b>
		Value \$ <b>95,000.00</b>						
Account No.								
<b>Internal Revenue Service</b> <b>PO Box 21126</b> <b>Philadelphia, PA 19114</b>	<b>J</b>	<b>2003</b> <b>Statutory Lien</b> <b>Location: 11780 Harbour Light, North</b> <b>Royalton OH; ppn 481-27-338; Situated</b> <b>in the City of North Royalton, County of</b> <b>Cuyahoga and State of Ohio, and known</b> <b>as being all of Unit # 1780 (together with</b> <b>an undivided interest in the common</b>					<b>4,476.00</b>	<b>4,476.00</b>
		Value \$ <b>95,000.00</b>						
Subtotal							<b>124,892.00</b>	
(Total of this page)								

1 continuation sheets attached

In re **Lawrence Fell,  
Sharon Fell**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE D. CREDITORS HOLDING SECURED CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	H W J C	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION IF ANY
			DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND MARKET VALUE OF PROPERTY SUBJECT TO LIEN					
Account No.			<b>2002 Statutory Lien</b>					
<b>State of Ohio Attorney General Revenue Recovery Section 101 East Town Street Columbus, OH 43215-5148</b>		<b>J</b>	<b>Location: 11780 Harbour Light, North Royalton OH; ppn 481-27-338; Situated in the City of North Royalton, County of Cuyahoga and State of Ohio, and known as being all of Unit # 1780 (together with an undivided interest in the common</b>					
			Value \$ <b>95,000.00</b>				<b>289.00</b>	<b>289.00</b>
Account No.								
			Value \$					
Account No.								
			Value \$					
Account No.								
			Value \$					
Account No.								
			Value \$					

Sheet **1** of **1** continuation sheets attached to  
Schedule of Creditors Holding Secured Claims

Subtotal  
(Total of this page)

**289.00**

Total  
(Report on Summary of Schedules)

**125,181.00**

In re **Lawrence Fell,  
Sharon Fell**

Case No. \_\_\_\_\_

Debtors

## **SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Repeat this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(2).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$4,925\* per person earned within 90 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507 (a)(3).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$4,925\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(5).

☐ **Deposits by individuals**

Claims of individuals up to \$2,225\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(6).

☐ **Alimony, Maintenance, or Support**

Claims of a spouse, former spouse, or child of the debtor for alimony, maintenance, or support, to the extent provided in 11 U.S.C. § 507(a)(7).

☒ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

\*Amounts are subject to adjustment on April 1, 2007, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

1 continuation sheets attached

In re **Lawrence Fell,  
Sharon Fell**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**  
(Continuation Sheet)

**Taxes and Certain Other Debts  
Owed to Governmental Units**

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E D E B I T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	TOTAL AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM					
Account No.		<b>2002</b>					
<b>City of North Royalton 13834 Ridge Road North Royalton, OH 44133</b>	<b>J</b>	<b>personal income tax</b>				<b>581.42</b>	<b>581.42</b>
Account No.		<b>2003</b>					
<b>City of North Royalton 13834 Ridge Road North Royalton, OH 44133</b>	<b>J</b>	<b>personal income tax</b>				<b>318.00</b>	<b>318.00</b>
Account No.		<b>2004</b>					
<b>City of North Royalton 13834 Ridge Road North Royalton, OH 44133</b>	<b>J</b>	<b>PERSONAL INCOME TAX</b>				<b>365.00</b>	<b>365.00</b>
Account No. <b>ST02085965</b>		<b>2002</b>					
<b>State of Ohio Attorney General Revenue Recovery Section 101 East Town Street Columbus, OH 43215-5148</b>	<b>H</b>	<b>personal income tax</b>				<b>289.00</b>	<b>0.00</b>
Account No.							

Sheet **1** of **1** continuation sheets attached to  
Schedule of Creditors Holding Unsecured Priority Claims

Subtotal  
(Total of this page)

**1,553.42**

Total  
(Report on Summary of Schedules)

**1,553.42**

In re **Lawrence Fell,  
Sharon Fell**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>444786758339</b>  <b>ACE Recovery</b> <b>450 Blackbrook Road</b> <b>Painesville, OH 44077-1219</b>	<b>J</b>	<b>2005</b> <b>collection agent for Magnatech</b>				<b>238.00</b>
Account No. <b>026812808</b>  <b>Allstate</b> <b>PO Box 40047</b> <b>Roanoke, VA 24022</b>	<b>J</b>					<b>1,000.00</b>
Account No. <b>333538391</b>  <b>ATT Wireless</b> <b>PO Box 8220</b> <b>Aurora, IL 60572-8220</b>	<b>J</b>	<b>2000</b> <b>utility service</b>				<b>0.00</b>
Account No. <b>LJF01</b>  <b>Back Pain Institute of Cleveland</b> <b>PO Box 585</b> <b>Daleville, IN 47334</b>	<b>J</b>	<b>2004</b> <b>medical treatment</b>				<b>353.00</b>
Subtotal (Total of this page)						<b>1,591.00</b>

11 continuation sheets attached

In re **Lawrence Fell,  
Sharon Fell**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>60383-1-1</b>  <b>Beachwood Orthopedic &amp; Physical</b> <b>PO Box 93825</b> <b>Cleveland, OH 44101-5825</b>	<b>H</b>	<b>2002</b> <b>medical treatment</b>				<b>209.00</b>
Account No. <b>5586</b>  <b>Brunswick Orthopedics Inc.</b> <b>1212 Pearl Rd</b> <b>Brunswick, OH 44212</b>	<b>J</b>	<b>medical treatment</b>				<b>600.00</b>
Account No. <b>5178-0521-3190-6626</b>  <b>Capital One</b> <b>PO Box 85184</b> <b>Richmond, VA 23285-5184</b>	<b>W</b>	<b>2002-2005</b> <b>credit card</b>				<b>992.87</b>
Account No. <b>1768911118349</b>  <b>Capital One Auto Finance</b> <b>PO Box 260848</b> <b>Plano, TX 75026</b>	<b>J</b>	<b>2002</b> <b>deficiency balance on automobile loan 2004</b> <b>Cavalier</b>				<b>13,865.99</b>
Account No. <b>FEL441330000</b>  <b>Checkcare Systems of Cleveland</b> <b>PO Box 31298</b> <b>Independence, OH 44131-0298</b>	<b>J</b>	<b>Overdrawn Account</b>				<b>100.00</b>
Sheet no. <u>1</u> of <u>11</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>15,767.86</b>
Subtotal (Total of this page)						<b>15,767.86</b>

In re **Lawrence Fell,  
Sharon Fell**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>23304084009-3</b>  <b>City of Cleveland</b> <b>Division of Water</b> <b>PO Box 94540</b> <b>Cleveland, OH 44101-4540</b>	<b>J</b>	<b>2004-2005</b> <b>utility service</b>				<b>320.00</b>
Account No.  <b>City of North Royalton</b> <b>13834 Ridge Road</b> <b>North Royalton, OH 44133</b>	<b>J</b>	<b>1999</b> <b>personal income tax</b>				<b>851.13</b>
Account No.  <b>City of North Royalton</b> <b>13834 Ridge Road</b> <b>North Royalton, OH 44133</b>	<b>J</b>	<b>2000</b> <b>personal income tax</b>				<b>1,164.88</b>
Account No.  <b>City of North Royalton</b> <b>13834 Ridge Road</b> <b>North Royalton, OH 44133</b>	<b>J</b>	<b>2001</b> <b>personal income tax</b>				<b>773.50</b>
Account No. <b>481-27338.0</b>  <b>City of North Royalton</b> <b>13834 Ridge Road</b> <b>North Royalton, OH 44133</b>	<b>J</b>	<b>2004</b> <b>sewer</b>				<b>1,759.00</b>
Sheet no. <u>2</u> of <u>11</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal</b> (Total of this page) <b>4,868.51</b>

In re **Lawrence Fell,  
Sharon Fell**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G U E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>034301948, 031060931</b>  <b>Cleveland Clinic Foundation</b> <b>PO Box 73662</b> <b>Cleveland, OH 44193-1273</b>	<b>J</b>	<b>2002</b> <b>medical treatment</b>				<b>671.00</b>
Account No. <b>A79400</b>  <b>CPS- Security</b> <b>PO Box 730858</b> <b>Dallas, TX 75373</b>	<b>J</b>	<b>Overdrawn Account</b>				<b>100.00</b>
Account No. <b>4227 0937 1344 3129</b>  <b>Cross Country Bank</b> <b>PO Box 310730</b> <b>Boca Raton, FL 33434-0730</b>	<b>H</b>	<b>2001</b> <b>credit card</b>				<b>1,201.00</b>
Account No. <b>1150074 43146 3</b>  <b>Ctibank USA</b> <b>PO Box 20363</b> <b>Kansas City, MO 64195-0363</b>	<b>J</b>	<b>2002-2005</b> <b>credit card</b>				<b>2,617.00</b>
Account No. <b>2 8076 002576955</b>  <b>Cuyahoga County Public Library</b> <b>2111 Snow Road</b> <b>Parma, OH 44134-2728</b>	<b>J</b>	<b>2004</b> <b>overdue/lost books</b>				<b>270.85</b>
Sheet no. <u>3</u> of <u>11</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) <b>4,859.85</b>

In re **Lawrence Fell,  
Sharon Fell**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>2 8076 002576930</b>  <b>Cuyahoga County Public Library</b> <b>2111 Snow Road</b> <b>Parma, OH 44134-2728</b>	<b>J</b>	<b>2004 late fees</b>				<b>59.95</b>
Account No. <b>2 8076 002576948</b>  <b>Cuyahoga County Public Library</b> <b>2111 Snow Road</b> <b>Parma, OH 44134-2728</b>	<b>J</b>	<b>2004 late fees</b>				<b>62.75</b>
Account No. <b>5095504, 5288457</b>  <b>First Federal Credit Control, Inc.</b> <b>24700 Chagrin Boulevard Suite 205</b> <b>Beachwood, OH 44122-5662</b>	<b>H</b>	<b>2004 collection agent for Radiology Associates</b>				<b>396.00</b>
Account No. <b>5417 6109 0708 6468</b>  <b>First National Bank Brookings</b> <b>PO Box 6000</b> <b>Brookings, SD 57006</b>	<b>J</b>	<b>2000-2005 credit card</b>				<b>790.00</b>
Account No. <b>4301 7181 4010 0418</b>  <b>First Premier Bank</b> <b>PO Box 5114</b> <b>Sioux Falls, SD 57117</b>	<b>H</b>	<b>2000 credit card</b>				<b>628.00</b>
Sheet no. <b>4</b> of <b>11</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal (Total of this page)</b>
						<b>1,936.70</b>

In re **Lawrence Fell,  
Sharon Fell**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G U E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>042373645</b>  <b>Genie of Fairview Door Co</b> <b>3501 E Royalton Road</b> <b>Broadview Heights, OH 44147</b>	<b>J</b>	<b>2004 repair</b>				<b>76.00</b>
Account No. <b>7554411 122347</b>  <b>Horizon Orthopedic, Inc.</b> <b>PO Box 42098</b> <b>Brook Park, OH 44142-0098</b>	<b>J</b>	<b>2004 medical treatment</b>				<b>427.00</b>
Account No. <b>007410</b>  <b>Institute for Women and Children</b> <b>3609 Park East Drive Suite 210</b> <b>Beachwood, OH 44122</b>	<b>W</b>	<b>2003-2004 medical treatment for minor child</b>				<b>1,052.00</b>
Account No. <b>***-**-5602</b>  <b>Internal Revenue Service</b> <b>PO Box 21126</b> <b>Philadelphia, PA 19114</b>	<b>J</b>	<b>1996 personal income tax</b>				<b>153.13</b>
Account No. <b>***-**-7501</b>  <b>Internal Revenue Service</b> <b>PO Box 21126</b> <b>Philadelphia, PA 19114</b>	<b>W</b>	<b>1995 personal income tax</b>				<b>157.71</b>
Sheet no. <u>5</u> of <u>11</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) <b>1,865.84</b>

In re **Lawrence Fell,  
Sharon Fell**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. ***-**-5602  Internal Revenue Service PO Box 21126 Philadelphia, PA 19114	J	1997 personal income tax				6,385.59
Account No. ***-**-5602  Internal Revenue Service PO Box 21126 Philadelphia, PA 19114	H	1998 personal income tax				3,130.25
Account No. ***-**-5602  Internal Revenue Service PO Box 21126 Philadelphia, PA 19114	H	1999 personal income tax				1,819.37
Account No. ***-**-7501  Internal Revenue Service PO Box 21126 Philadelphia, PA 19114	W	1998 personal income tax				4,423.89
Account No. ***-**-7501  Internal Revenue Service PO Box 21126 Philadelphia, PA 19114	W	1999 personal income tax				2,285.01
Sheet no. <u>6</u> of <u>11</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>18,044.11</b>

In re **Lawrence Fell,  
Sharon Fell**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>14582JS</b>  <b>Janet Shin MD</b> <b>30575 Euclid Ave</b> <b>Wickliffe, OH 44092</b>	<b>J</b>	<b>2003</b> <b>medical treatment</b>				<b>76.40</b>
Account No.  <b>Laura Starr</b> <b>7 Tudor Lane</b> <b>Lockport, NY 14094</b>	<b>J</b>	<b>2005</b> <b>loan</b>				<b>1,500.00</b>
Account No. <b>1344403</b>  <b>Metro Health Center</b> <b>PO Box 73682</b> <b>Cleveland, OH 44193-3682</b>	<b>H</b>	<b>2004</b> <b>medical treatment</b>				<b>167.00</b>
Account No. <b>018411916</b>  <b>Millenium Radiology Associates</b> <b>5620 Southwyck Blvd</b> <b>Toledo, OH 43614-1501</b>	<b>J</b>	<b>2004</b> <b>medical services</b>				<b>420.00</b>
Account No. <b>11GV08</b>  <b>NCO Financial Services</b> <b>PO Box 41417 Dept 99</b> <b>Philadelphia, PA 19101</b>	<b>J</b>	<b>medical treatment</b>				<b>400.00</b>
Sheet no. <u>7</u> of <u>11</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal</b> (Total of this page) <b>2,563.40</b>

In re **Lawrence Fell,  
Sharon Fell**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>5267908</b>  <b>Parma Community General Hospital</b> <b>PO Box 931242</b> <b>Cleveland, OH 44193-1363</b>	<b>J</b>	<b>2004</b> <b>medical treatment</b>				<b>138.00</b>
Account No. <b>47023457428</b>  <b>Penn Credit Corporation</b> <b>PO Box 988</b> <b>Harrisburg, PA 17108-0988</b>	<b>H</b>	<b>2000</b> <b>book club</b>				<b>100.00</b>
Account No. <b>4301 7181 4010 0418</b>  <b>Premier Bankcard</b> <b>PO Box 2208</b> <b>Vacaville, CA 95696</b>	<b>J</b>	<b>credit card</b>				<b>628.08</b>
Account No.  <b>Psota Anesthetic Dentistry</b> <b>7123 Pearl Road #100</b> <b>Cleveland, OH 44130</b>	<b>J</b>	<b>2003</b> <b>medical treatment</b>				<b>110.40</b>
Account No. <b>***-**-5602</b>  <b>Regional Income Tax Agency</b> <b>PO Box 94951</b> <b>Cleveland, OH 44101-4951</b>	<b>J</b>	<b>1999-2002</b> <b>personal income tax</b>				<b>2,921.41</b>
Sheet no. <u>8</u> of <u>11</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) <b>3,897.89</b>

In re **Lawrence Fell,  
Sharon Fell**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>1537529</b>  <b>Roknedin Savafi, MD</b> <b>1611 South Green Road #2091</b> <b>Cleveland, OH 44121</b>	<b>H</b>	<b>2003</b> <b>medical treatment</b>				<b>809.50</b>
Account No. <b>1150074431463</b>  <b>Sears</b> <b>PO Box 2149</b> <b>Columbus, OH 43218-0374</b>	<b>W</b>	<b>2001-2005</b> <b>credit card</b>				<b>3,216.00</b>
Account No.  <b>Shirley Fell</b> <b>PO Box 33462</b> <b>North Royalton, OH 44133</b>	<b>J</b>	<b>2005</b> <b>loan</b>				<b>2,500.00</b>
Account No. <b>32219 32716 32780</b>  <b>State Road Family Practice</b> <b>12744 State Road</b> <b>North Royalton, OH 44133</b>	<b>J</b>	<b>2003</b> <b>medical services</b>				<b>560.00</b>
Account No. <b>62062117689111001</b>  <b>Summit Acceptance Corp.</b> <b>3901 Dallas Pkwy</b> <b>Plano, TX 75093-7864</b>	<b>H</b>	<b>2001</b> <b>automobile deficiency balance</b>				<b>8,084.00</b>
Sheet no. <u>9</u> of <u>11</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>15,169.50</b>
Subtotal (Total of this page)						<b>15,169.50</b>

In re **Lawrence Fell,  
Sharon Fell**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>917918599390</b>  <b>Target National Bank</b> <b>PO Box 59231</b> <b>Minneapolis, MN 55459-0231</b>	<b>H</b>	<b>2004 credit card</b>				<b>670.00</b>
Account No. <b>233000</b>  <b>Terry L Marquadt, DDS, Inc</b> <b>5171 Wallings Road #110</b> <b>North Royalton, OH 44133-3198</b>	<b>H</b>	<b>2004 medical treatment</b>				<b>258.00</b>
Account No. <b>1100329068 41</b>  <b>The Illuminating Company</b> <b>PO Box 3638</b> <b>Akron, OH 44309-3638</b>	<b>J</b>	<b>2004-2005 utility service</b>				<b>2,198.09</b>
Account No. <b>132613-1-1</b>  <b>The Surgery Center</b> <b>19250 E. Bagley Rd</b> <b>Middleburg Hts, OH 44130</b>	<b>J</b>	<b>medical treatment</b>				<b>700.00</b>
Account No. <b>control # 100995573</b>  <b>Tops</b> <b>PO Box 9200</b> <b>Boston, MA 02209</b>	<b>J</b>	<b>Overdrawn Check</b>				<b>200.00</b>
Sheet no. <b>10</b> of <b>11</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>4,026.09</b>
Subtotal (Total of this page)						<b>4,026.09</b>

In re **Lawrence Fell,  
Sharon Fell**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>35406091130380</b>	W	<b>2004 nsf check - Dollar Tree</b>				<b>75.00</b>
<b>TRS Recovery Service PO Box 60022 City Of Industry, CA 91716-0022</b>						
Account No. <b>M3582115</b>	J	<b>2002 medical treatment</b>				<b>1,371.00</b>
<b>Westside Imaging Center 3355 Richmond Rd#221 Beachwood, OH 44122</b>						
Account No.						
Account No.						
Account No.						
Sheet no. <u>11</u> of <u>11</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>1,446.00</b>
						Total (Report on Summary of Schedules)
						<b>76,036.75</b>

In re **Lawrence Fell,  
Sharon Fell**

Case No. \_\_\_\_\_

Debtors

## **SCHEDULE G. EXECUTORY CONTRACTS AND UNEXPIRED LEASES**

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described.

NOTE: A party listed on this schedule will not receive notice of the filing of this case unless the party is also scheduled in the appropriate schedule of creditors.

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code,  
of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest.  
State whether lease is for nonresidential real property.  
State contract number of any government contract.

In re     **Lawrence Fell,  
Sharon Fell**

Case No. \_\_\_\_\_

Debtors

SCHEDULE H. CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. In community property states, a married debtor not filing a joint case should report the name and address of the nondebtor spouse on this schedule. Include all names used by the nondebtor spouse during the six years immediately preceding the commencement of this case.

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
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In re **Lawrence Fell**  
**Sharon Fell**

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE I. CURRENT INCOME OF INDIVIDUAL DEBTOR(S)**

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 12 or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.

Debtor's Marital Status:	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP	AGE
<b>Married</b>	<b>None.</b>	

EMPLOYMENT		DEBTOR	SPOUSE
Occupation		<b>Review Appraiser</b>	<b>Telemarketing</b>
Name of Employer		<b>Mortgage Info Services</b>	<b>Dial America</b>
How long employed		<b>3 yrs</b>	<b>15 Months</b>
Address of Employer		<b>4877 Galaxy Pkwy Cleveland, OH 44128</b>	<b>7271 Engle Middleburg Hts, OH 44130</b>

INCOME: (Estimate of average monthly income)

Current monthly gross wages, salary, and commissions (pro rate if not paid monthly)

Estimated monthly overtime

	DEBTOR	SPOUSE
	\$ <b>3,536.00</b>	\$ <b>1,184.00</b>
	\$ <b>0.00</b>	\$ <b>0.00</b>
<b>SUBTOTAL</b>	<b>\$ 3,536.00</b>	<b>\$ 1,184.00</b>

## LESS PAYROLL DEDUCTIONS

- a. Payroll taxes and social security
- b. Insurance
- c. Union dues
- d. Other (Specify) \_\_\_\_\_

\$ <b>696.00</b>	\$ <b>152.00</b>
\$ <b>221.00</b>	\$ <b>0.00</b>
\$ <b>0.00</b>	\$ <b>0.00</b>
\$ <b>0.00</b>	\$ <b>0.00</b>
\$ <b>0.00</b>	\$ <b>0.00</b>

## SUBTOTAL OF PAYROLL DEDUCTIONS

<b>\$ 917.00</b>	<b>\$ 152.00</b>
<b>\$ 2,619.00</b>	<b>\$ 1,032.00</b>

## TOTAL NET MONTHLY TAKE HOME PAY

Regular income from operation of business or profession or farm (attach detailed statement)

Income from real property

Interest and dividends

Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above

Social security or other government assistance  
(Specify) \_\_\_\_\_

Pension or retirement income

Other monthly income

(Specify) \_\_\_\_\_

\$ <b>0.00</b>	\$ <b>0.00</b>
\$ <b>0.00</b>	\$ <b>0.00</b>
\$ <b>0.00</b>	\$ <b>0.00</b>
\$ <b>0.00</b>	\$ <b>0.00</b>
\$ <b>0.00</b>	\$ <b>0.00</b>
\$ <b>0.00</b>	\$ <b>0.00</b>
\$ <b>0.00</b>	\$ <b>0.00</b>
\$ <b>0.00</b>	\$ <b>0.00</b>
\$ <b>0.00</b>	\$ <b>0.00</b>

## TOTAL MONTHLY INCOME

<b>\$ 2,619.00</b>	<b>\$ 1,032.00</b>
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TOTAL COMBINED MONTHLY INCOME \$ **3,651.00**

(Report also on Summary of Schedules)

Describe any increase or decrease of more than 10% in any of the above categories anticipated to occur within the year following the filing of this document:

**SCHEDULE J. CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)**

Complete this schedule by estimating the average monthly expenses of the debtor and the debtor's family. Pro rate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

Rent or home mortgage payment (include lot rented for mobile home)		\$	<b>717.00</b>
Are real estate taxes included?	Yes <u>      </u>	No <u><b>X</b></u>	
Is property insurance included?	Yes <u>      </u>	No <u><b>X</b></u>	
Utilities:			
Electricity and heating fuel		\$	<b>150.00</b>
Water and sewer		\$	<b>65.00</b>
Telephone		\$	<b>150.00</b>
Other <b>Satellite dish</b>		\$	<b>50.00</b>
Home maintenance (repairs and upkeep)		\$	<b>50.00</b>
Food		\$	<b>600.00</b>
Clothing		\$	<b>100.00</b>
Laundry and dry cleaning		\$	<b>20.00</b>
Medical and dental expenses		\$	<b>200.00</b>
Transportation (not including car payments)		\$	<b>200.00</b>
Recreation, clubs and entertainment, newspapers, magazines, etc.		\$	<b>50.00</b>
Charitable contributions		\$	<b>50.00</b>
Insurance (not deducted from wages or included in home mortgage payments)			
Homeowner's or renter's		\$	<b>20.00</b>
Life		\$	<b>0.00</b>
Health		\$	<b>0.00</b>
Auto		\$	<b>150.00</b>
Other		\$	<b>0.00</b>
Taxes (not deducted from wages or included in home mortgage payments)			
(Specify) <b>Real Estate</b>		\$	<b>120.00</b>
Installment payments: (In chapter 12 and 13 cases, do not list payments to be included in the plan.)			
Auto		\$	<b>325.00</b>
Other		\$	<b>0.00</b>
Other		\$	<b>0.00</b>
Other		\$	<b>0.00</b>
Alimony, maintenance, and support paid to others		\$	<b>0.00</b>
Payments for support of additional dependents not living at your home		\$	<b>0.00</b>
Regular expenses from operation of business, profession, or farm (attach detailed statement)		\$	<b>0.00</b>
Other <b>Bethel Christian Academy</b>		\$	<b>510.00</b>
Other <b>Condo association fee</b>		\$	<b>135.00</b>
<b>TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)</b>		<b>\$</b>	<b>3,662.00</b>

[FOR CHAPTER 12 AND 13 DEBTORS ONLY]

Provide the information requested below, including whether plan payments are to be made bi-weekly, monthly, annually, or at some other regular interval.

A. Total projected monthly income		\$	<b>N/A</b>
B. Total projected monthly expenses		\$	<b>N/A</b>
C. Excess income (A minus B)		\$	<b>N/A</b>
D. Total amount to be paid into plan each	_____	\$	<b>N/A</b>
	(interval)		

**United States Bankruptcy Court  
Northern District of Ohio**

In re **Lawrence Fell  
Sharon Fell**

Debtor(s)

Case No.  
Chapter

**7**

**DECLARATION CONCERNING DEBTOR'S SCHEDULES**

**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 26 sheets *[total shown on summary page plus 1]*, and that they are true and correct to the best of my knowledge, information, and belief.

Date **October 4, 2005**

Signature **/s/ Lawrence Fell**  
**Lawrence Fell**  
Debtor

Date **October 4, 2005**

Signature **/s/ Sharon Fell**  
**Sharon Fell**  
Joint Debtor

*Penalty for making a false statement or concealing property:* Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
18 U.S.C. §§ 152 and 3571.

United States Bankruptcy Court  
Northern District of Ohio

In re **Lawrence Fell**  
**Sharon Fell**

Debtor(s)

Case No.  
Chapter

**7**

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs.

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

*"In business."* A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within the six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed.

*"Insider."* The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None  
☐

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE (if more than one)
<b>\$37,862.00</b>	<b>YTD</b>
<b>\$45,181.00</b>	<b>2004</b>
<b>\$54,209.00</b>	<b>2003</b>

2. Income other than from employment or operation of business

None  
☒

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
--------	--------

### 3. Payments to creditors

- None ☐ a. List all payments on loans, installment purchases of goods or services, and other debts, aggregating more than \$600 to any creditor, made within **90 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
Transouth Financial PO Box 210189 Bedford, TX 76022	7/05 - paid by mother in law	\$2,500.00	\$0.00

- None ☒ b. List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATE OF PAYMENT	AMOUNT PAID	AMOUNT STILL OWING
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### 4. Suits and administrative proceedings, executions, garnishments and attachments

- None ☐ a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
Harbour Light Condominium Assoc. vs Fell; CV-02-479837	foreclosure	Cuyahoga Common Pleas	pending
City of North Royalton v Fell, et al 04 CVI 490	collection	Parma Municipal Court	dismissed
City of North Royalton vs Fell; Case 05CVF03214	collection	Parma Municipal Court	pending

- None ☐ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
Internal Revenue Service PO Box 21126 Philadelphia, PA 19114	9/30/05	\$1337.32 from US Bank checking account

### 5. Repossessions, foreclosures and returns

- None ☐ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
Capital One Auto Finance PO Box 260848 Plano, TX 75026	2004	2003 Chevrolet Cavalier

**6. Assignments and receiverships**

- None ☒ a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIGNMENT OR SETTLEMENT
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- None ☒ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN	NAME AND LOCATION OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY
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**7. Gifts**

- None ☒ List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
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**8. Losses**

- None ☒ List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
--------------------------------------	--	--------------

**9. Payments related to debt counseling or bankruptcy**

- None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Michael E. Reardon Co., LPA 7050 Engle Road Suite 100 Middleburg Heights, OH 44130	9/8/05; 9/15/05; 9/29/05; 10/3/05	\$550.00

**10. Other transfers**

- None ☒ List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
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**11. Closed financial accounts**

- None ☐ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
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**12. Safe deposit boxes**

- None ☐ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
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**13. Setoffs**

- None ☐ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
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**14. Property held for another person**

- None ☐ List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
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**15. Prior address of debtor**

- None ☐ If the debtor has moved within the **two years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
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**16. Spouses and Former Spouses**

- None ☐ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the **six-year period** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

## 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

- None ☒ a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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- None ☒ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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- None ☒ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
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## 18 . Nature, location and name of business

- None ☐ a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was a self-employed professional within the **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

NAME	TAXPAYER I.D. NO. (EIN)	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
Homeowners Appraisal Services, Inc.		2485 Winesap Broadview Heights, OH 44147	residential appraisal service	1997-2002

- None ☒ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME	ADDRESS
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The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within the **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or otherwise self-employed.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within the six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

### 19. Books, records and financial statements

- None ☐ a. List all bookkeepers and accountants who within the **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

- None ☐ b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

ADDRESS

DATES SERVICES RENDERED

- None ☐ c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

ADDRESS

- None ☐ d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued within the **two years** immediately preceding the commencement of this case by the debtor.

NAME AND ADDRESS

DATE ISSUED

### 20. Inventories

- None ☐ a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY  
(Specify cost, market or other basis)

- None ☐ b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY  
RECORDS

### 21. Current Partners, Officers, Directors and Shareholders

- None ☐ a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

- None ☐ b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE  
OF STOCK OWNERSHIP

**22 . Former partners, officers, directors and shareholders**

None ☐ a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME	ADDRESS	DATE OF WITHDRAWAL
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None ☐ b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS	TITLE	DATE OF TERMINATION
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**23 . Withdrawals from a partnership or distributions by a corporation**

None ☐ If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR	DATE AND PURPOSE OF WITHDRAWAL	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
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**24. Tax Consolidation Group.**

None ☐ If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within the **six-year period** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION	TAXPAYER IDENTIFICATION NUMBER
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**25. Pension Funds.**

None ☐ If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within the **six-year period** immediately preceding the commencement of the case.

NAME OF PENSION FUND	TAXPAYER IDENTIFICATION NUMBER
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**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date <u>October 4, 2005</u>	Signature <u>/s/ Lawrence Fell</u> <b>Lawrence Fell</b> Debtor
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Date <u>October 4, 2005</u>	Signature <u>/s/ Sharon Fell</u> <b>Sharon Fell</b> Joint Debtor
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*Penalty for making a false statement:* Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

United States Bankruptcy Court  
Northern District of Ohio

In re **Lawrence Fell**  
**Sharon Fell**

Debtor(s)

Case No.  
Chapter

**7**

**CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION**

1. I have filed a schedule of assets and liabilities which includes consumer debts secured by property of the estate.
2. I intend to do the following with respect to the property of the estate which secures those consumer debts:

*a. Property to Be Surrendered.*

**Description of Property**  
**-NONE-**

**Creditor's name**

*b. Property to Be Retained*

*[Check any applicable statement.]*

Property is claimed as exempt	Property will be redeemed pursuant to 11 U.S.C. § 722	Debt will be reaffirmed pursuant to 11 U.S.C. § 524(c)
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1.	Description of Property <b>2005 Ford Focus ZX4; VIN 1FAFP34N95W114487</b>	Creditor's Name <b>Drive Financial Services</b>
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Property is claimed as exempt	Property will be redeemed pursuant to 11 U.S.C. § 722	Debt will be reaffirmed pursuant to 11 U.S.C. § 524(c)
<b>Debtor will retain collateral and continue to make regular payments.</b>		

2. Description of Property  
**Location: 11780 Harbour Light, North  
Royalton OH; ppn 481-27-338; Situated  
in the City of North Royalton, County of  
Cuyahoga and State of Ohio, and known  
as being all of Unit # 1780 (together with  
an undivided interest in the common  
areas a**

Creditor's Name  
**Charter One Mortgage**

**Debtor will retain collateral and continue to  
make regular payments.**

3. Location: 11780 Harbour Light, North  
Royalton OH; ppn 481-27-338; Situated  
in the City of North Royalton, County of  
Cuyahoga and State of Ohio, and known  
as being all of Unit # 1780 (together with  
an undivided interest in the common  
areas a

Harbour Light  
Condominium Assoc.

**Debtor will retain collateral and continue to  
make regular payments.**

4. Location: 11780 Harbour Light, North  
Royalton OH; ppn 481-27-338; Situated  
in the City of North Royalton, County of  
Cuyahoga and State of Ohio, and known  
as being all of Unit # 1780 (together with  
an undivided interest in the common  
areas a

Internal Revenue  
Service

**Debtor will retain collateral and continue to  
make regular payments.**

5. Location: 11780 Harbour Light, North  
Royalton OH; ppn 481-27-338; Situated  
in the City of North Royalton, County of  
Cuyahoga and State of Ohio, and known  
as being all of Unit # 1780 (together with  
an undivided interest in the common  
areas a

State of Ohio Attorney  
General

Date October 4, 2005

Signature /s/ Lawrence Fell  
**Lawrence Fell**  
Debtor

Date October 4, 2005

Signature /s/ Sharon Fell  
**Sharon Fell**  
Joint Debtor

**United States Bankruptcy Court  
Northern District of Ohio**

In re **Lawrence Fell  
Sharon Fell**

Debtor(s)

Case No.

Chapter **7**

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept.....	\$	<b>550.00</b>
Prior to the filing of this statement I have received.....	\$	<b>550.00</b>
Balance Due.....	\$	<b>0.00</b>

2. \$ **209.00** of the filing fee has been paid.

3. The source of the compensation paid to me was:

☒ Debtor      ☐ Other (specify):

4. The source of compensation to be paid to me is:

☒ Debtor      ☐ Other (specify):

5. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

**Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.**

7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

**Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: **October 4, 2005**

/s/ Michael E. Reardon

**Michael E. Reardon  
Michael E. Reardon Co., LPA  
7050 Engle Road Suite 100  
Middleburg Heights, OH 44130  
440-239-1109 Fax: 440-239-1326  
MRreardonecf@msn.com**

**United States Bankruptcy Court  
Northern District of Ohio**

In re	<b>Lawrence Fell Sharon Fell</b>	Debtor(s)	Case No. Chapter	<b>7</b>
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**VERIFICATION OF CREDITOR MATRIX**

The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date: <b>October 4, 2005</b>	<b>/s/ Lawrence Fell</b> <b>Lawrence Fell</b> Signature of Debtor
Date: <b>October 4, 2005</b>	<b>/s/ Sharon Fell</b> <b>Sharon Fell</b> Signature of Debtor

ACE Recovery  
450 Blackbrook Road  
Painesville, OH 44077-1219

Allstate  
PO Box 40047  
Roanoke, VA 24022

Arthur Foth  
Foth & Foth  
11221 Pearl Road  
Strongsville, OH 44136-3396

ATT Wireless  
PO Box 8220  
Aurora, IL 60572-8220

Back Pain Institute of Cleveland  
PO Box 585  
Daleville, IN 47334

Beachwood Orthopedic & Physical  
PO Box 93825  
Cleveland, OH 44101-5825

Brunswick Orthopedics Inc.  
1212 Pearl Rd  
Brunswick, OH 44212

Capital One  
PO Box 85184  
Richmond, VA 23285-5184

Capital One Auto Finance  
PO Box 260848  
Plano, TX 75026

Carlisle, McNellie, Rini, Kramer  
25200 Chagrin Blvd Suite 240  
Beachwood, OH 44122-5681

Charter One Mortgage  
1215 Superior Avenue  
Cleveland, OH 44114

Chase Receivables  
1247 Broadway  
Sonoma, CA 95476

Checkcare Systems of Cleveland  
PO Box 31298  
Independence, OH 44131-0298

Citibank Card Service Center  
PO Box 6923  
The Lakes, NV 88901

City of Cleveland  
Division of Water  
PO Box 94540  
Cleveland, OH 44101-4540

City of North Royalton  
13834 Ridge Road  
North Royalton, OH 44133

Cleveland Clinic Foundation  
PO Box 73662  
Cleveland, OH 44193-1273

CPS- Security  
PO Box 730858  
Dallas, TX 75373

Credit Protection Associates  
13355 Noel Rd  
Dallas, TX 75240

Cross Country Bank  
PO Box 310730  
Boca Raton, FL 33434-0730

Ctibank USA  
PO Box 20363  
Kansas City, MO 64195-0363

Cuyahoga County Public Library  
2111 Snow Road  
Parma, OH 44134-2728

Debt Credit Services  
PO Box 8129  
Akron, OH 44320

Drive Financial Services  
PO Box 660633  
Dallas, TX 75266-0633

First Federal Credit Control, Inc.  
24700 Chagrin Boulevard Suite 205  
Beachwood, OH 44122-5662

First National Bank Brookings  
PO Box 6000  
Brookings, SD 57006

First Premier Bank  
PO Box 5114  
Sioux Falls, SD 57117

Genie of Fairview Door Co  
3501 E Royalton Road  
Broadview Heights, OH 44147

Harbour Light Condominium Assoc.  
11860 Harbour Light Drive  
North Royalton, OH 44133

Horizon Orthopedic, Inc.  
PO Box 42098  
Brook Park, OH 44142-0098

Institute for Women and Children  
3609 Park East Drive Suite 210  
Beachwood, OH 44122

Internal Revenue Service  
PO Box 21126  
Philadelphia, PA 19114

Janet Shin MD  
30575 Euclid Ave  
Wickliffe, OH 44092

Johna M. Bella, Esq.  
405 Madison Ave Suite 2200  
Toledo, OH 43604

Laura Starr  
7 Tudor Lane  
Lockport, NY 14094

Malcom S Gerald & Assoc.  
332 South Michigan Ave Suite 600  
Chicago, IL 60604

Metro Health Center  
PO Box 73682  
Cleveland, OH 44193-3682

Millenium Radiology Associates  
5620 Southwyck Blvd  
Toledo, OH 43614-1501

NCO Financial Services  
PO Box 41417 Dept 99  
Philadelphia, PA 19101

Parma Community General Hospital  
PO Box 931242  
Cleveland, OH 44193-1363

Penn Credit Corporation  
PO Box 988  
Harrisburg, PA 17108-0988

Premier Bankcard  
PO Box 2208  
Vacaville, CA 95696

Psota Anesthetic Dentistry  
7123 Pearl Road #100  
Cleveland, OH 44130

Regional Income Tax Agency  
PO Box 94951  
Cleveland, OH 44101-4951

Revenue Group  
3700 Park East Drive Suite 240  
Beachwood, OH 44122-4308

Roknedin Savafi, MD  
1611 South Green Road #2091  
Cleveland, OH 44121

Sears  
PO Box 2149  
Columbus, OH 43218-0374

Shirley Fell  
PO Box 33462  
North Royalton, OH 44133

State of Ohio Attorney General  
Revenue Recovery Section  
101 East Town Street  
Columbus, OH 43215-5148

State Road Family Practice  
12744 State Road  
North Royalton, OH 44133

Summit Acceptance Corp.  
3901 Dallas Pkwy  
Plano, TX 75093-7864

Target National Bank  
PO Box 59231  
Minneapolis, MN 55459-0231

Terry L Marquadt, DDS, Inc  
5171 Wallings Road #110  
North Royalton, OH 44133-3198

The Illuminating Company  
PO Box 3638  
Akron, OH 44309-3638

The Surgery Center  
19250 E. Bagley Rd  
Middleburg Hts, OH 44130

Tops  
PO Box 9200  
Boston, MA 02209

TRS Recovery Service  
PO Box 60022  
City Of Industry, CA 91716-0022

Ventus Capital Services LP  
PO Box 741148  
Houston, TX 77274-1148

Westside Imaging Center  
3355 Richmond Rd#221  
Beachwood, OH 44122